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PTO/SB/21 (04-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

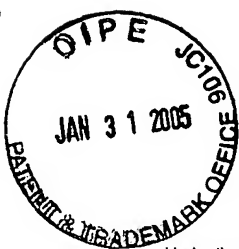
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/684,332
	Filing Date	October 10, 2003
	First Named Inventor	Raanan A. Miller
	Art Unit	2881
	Examiner Name	VANORE, David A.
	Attorney Docket Number	SION-P01-030

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input checked="" type="checkbox"/> Supplemental Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC)  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  Prior Art Citations Copy PCT Int'l Search Report Return Receipt Postcard
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	ROPES & GRAY LLP John V. Bianco - Reg. No. 36,748
Signature	
Date	Jan 28, 2005

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Date: January 28, 2005	Signature:  (Judith A. Herrick)



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Application No. (if known): 10/684,332

Attorney Docket No.: SION-P01-030

## Certificate of Mailing under 37 CFR 1.8

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on January 28 2005  
Date

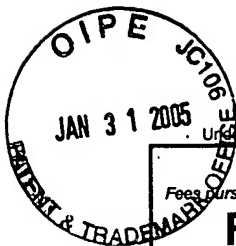
Signature

JUDITH A. HERRICK

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Supplemental Information Disclosure Statement (2 pages)  
SIDS (Citation) by Applicant Form PTO/SB/08 (1 page)  
Copies of Cited References A35, A36, A37, A38, A39, and A40  
Copy of PCT International Search Report (3 pages)  
Certificate of First Class Mailing (1 page)  
Return Receipt Postcard



Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b> <b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		<b>Complete if Known</b>		
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/684,332	
<b>TOTAL AMOUNT OF PAYMENT</b>		Filing Date	October 10, 2003	
(\$)		180.00	First Named Inventor	Raanan A. Miller
		Examiner Name	VANORE, David A.	
		Art Unit	2881	
		Attorney Docket No.	SION-P01-030	

<b>METHOD OF PAYMENT</b> (check all that apply)				
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify):
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: 18-1945 Deposit Account Name: Ropes & Gray LLP			
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee			
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments			

<b>FEE CALCULATION</b>						
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>						
	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>	
		<b>Small Entity</b>		<b>Small Entity</b>		<b>Small Entity</b>
<b>Application Type</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0
<b>2. EXCESS CLAIM FEES</b>						
<b>Fee Description</b>						<b>Small Entity</b>
						<b>Fee (\$)</b>
Each claim over 20 (including Reissues)						50
Each independent claim over 3 (including Reissues)						200
Multiple dependent claims						360
<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>		
				<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	
<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>			
<b>3. APPLICATION SIZE FEE</b>						
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						
<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>		
<b>4. OTHER FEE(S)</b>						
Non-English Specification, \$130 fee (no small entity discount)						<b>Fees Paid (\$)</b>
Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement						180.00

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent)	36,748
Name (Print/Type)	John V. Bianco	Telephone	(617) 951-7973
		Date	Jan 28, 2005

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Dated: January 28, 2005	Signature:  (Judith A. Herrick)

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28 2005 Signature *Judith A. Herrick*  
(Judith A. Herrick)

Docket No.: SION-P01-030  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Raanan A. Miller et al.

Application No.: 10/684,332

Confirmation No.: 9247

Filed: October 10, 2003

Art Unit: 2881

For: NOX MONITOR USING DIFFERENTIAL  
MOBILITY SPECTROMETRY

Examiner: VANORE, David A.

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT (SIDS)**

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Pursuant to 37 CFR 1.56, 1.97 and 1.98, the attention of the Patent and Trademark Office is hereby directed to the references listed on the attached PTO/SB/08. It is respectfully requested that the information be expressly considered during the prosecution of this application, and that the references be made of record therein and appear among the "References Cited" on any patent to issue therefrom.

This Supplemental Information Disclosure Statement is filed after the mailing date of a Final Office Action or Notice of Allowance, whichever occurred first, but on or before payment of the Issue Fee (37 CFR 1.97(d)). Applicants hereby petition that the Supplemental Information Disclosure Statement be considered.

References A35, A36, and A37 are being submitted in accordance with 37 CFR 1.97(e), because these references were first cited in a communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of this Supplemental Information Disclosure Statement. A copy of the PCT International Search Report is enclosed.

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02/02/2005 EAREGAY1 00000035 181945 10604332

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References A38, A39, and A40 are being submitted in accordance with 37 CFR 1.97(e), because these references were not known to any individual designated in 37 CFR 1.56(c) more than three months prior to the filing of this Supplemental Information Disclosure Statement and were not cited in counterpart foreign applications.

A copy of the references listed on the PTO/SB/08 are attached.

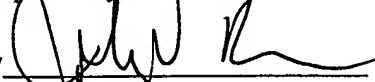
In accordance with 37 CFR 1.97(g), the filing of this Supplemental Information Disclosure Statement shall not be construed to mean that a search has been made or that no other material information as defined in 37 CFR 1.56(a) exists. In accordance with 37 CFR 1.97(h), the filing of this Supplemental Information Disclosure statement shall not be construed to be an admission that any patent, publication or other information referred to therein is "prior art" for this invention unless specifically designated as such.

It is submitted that the Supplemental Information Disclosure Statement is in compliance with 37 CFR 1.98 and the Examiner is respectfully requested to consider the listed references.

Please charge our Deposit Account No. 18-1945, under Order No. SION-P01-030 in the amount of \$180.00 covering the fee set forth in 37 CFR 1.17(p). The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 18-1945, under Order No. SION-P01-030.

Dated: Jan 28, 2005

Respectfully submitted,

By 

John V. Bianco

Registration No.: 36,748

ROPES & GRAY LLP

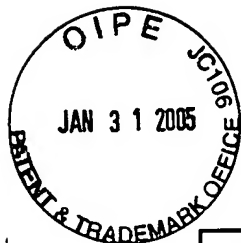
One International Place

Boston, Massachusetts 02110-2624

(617) 951-7000

(617) 951-7050 (Fax)

Attorneys/Agents For Applicant



PTO/SB/08a/b (08-03)

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<b>SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  (Use as many sheets as necessary)			<b>Complete if Known</b>		
			Application Number	10/684,332	
			Filing Date	October 10, 2003	
			First Named Inventor	Raanan A. Miller	
			Art Unit	2881	
			Examiner Name	VANORE, David A.	
	1	of	1	Attorney Docket Number	SION-P01-030

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. <sup>1</sup>	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code <sup>2</sup> (if known)			
	A35	US 2003/0070913 A1	04-17-2003	Miller et al.	
	A36	6,417,511	07-09-2002	Russ, IV, et al.	
	A37	6,744,043	06-01-2004	Loboda	
	A38	6,822,224 B2	11-23-2004	Guevremont	
	A39	6,825,461 B2	11-30-2004	Guevremont	
	A40	US2004/0232326 A1	11-25-2004	Guevremont	

FOREIGN PATENT DOCUMENTS							
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>
		Country Code <sup>3</sup> -Number <sup>4</sup> -Kind Code <sup>5</sup> (if known)					

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. <sup>6</sup> Applicant is to place a check mark here if English language Translation is attached.

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

Examiner Signature		Date Considered	
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